

PART B - FEE(S) TRANSMITTAL

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23469 7590 04/24/2006

JAECKLE FLEISCHMANN & MUGEL, LLP
190 Linden Oaks
ROCHESTER, NY 14625-2812

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/823,896	04/14/2004	James E. Masseh Jr.	89843.048703	5665

TITLE OF INVENTION: LOCKING MECHANISM FOR A SAFE DOOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/24/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
SCHRODE, WILLIAM THOMAS	3676		070-210000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Jaeckle Fleischmann & Mugel, LLP
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

John D. Brush & Co., Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

900 Linden Avenue, Rochester, New York 14625

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed.

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The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-0223 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Dennis B. Danelia

Date 7/20/06

Typed or printed name Dennis B. Danelia, Esq.

Registration No. 46,653

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